

P/3000022709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

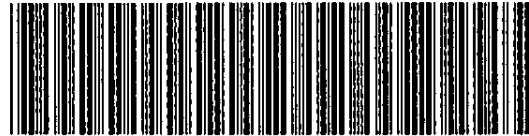
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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13 MAR 11 PM 4:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W13-9917

κ 03/12/13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
13 MAR 11 AM 8:00

SECTION OF STATE  
TALLAHASSEE, FLORIDA

February 18, 2013

JASON D. MARTINEZ  
555 N.E. 34TH STREET  
#1702  
MIAMI, FL 33137

SUBJECT: GET ME JASON CO.  
Ref. Number: W13000009917

We have received your document for GET ME JASON CO. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 213A00003977

## COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT: GET ME JASON CO.**  
(PROPOSED CORPORATE NAME – **MUST INCLUDE SUFFIX**)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: **JASON D. MARTINEZ**  
Name (Printed or typed)

**555 N.E. 34th STREET, #1702**  
Address

**MIAMI, FL 33137**  
City, State & Zip

**305-772-4961**  
Daytime Telephone number

*getmejason@yahoo.com*  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I    NAME**

The name of the corporation shall be: GET ME JASON CO.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

555 N.E. 34th ST., #1702

MIAMI, FL 33137

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: GENERAL SERVICES

**ARTICLE IV    SHARES**

The number of shares of stock is: 1000

**ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Jason D. Martinez, PVP/T/S

Name and Title: \_\_\_\_\_

Address: 555 NE 34 Street  
1702

Address: \_\_\_\_\_

Miami, FL 33137

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Virginia Christensen

Address: 555 NE 34th St., #1702

Miami, FL 33137

**ARTICLE VII INCORPORATOR**

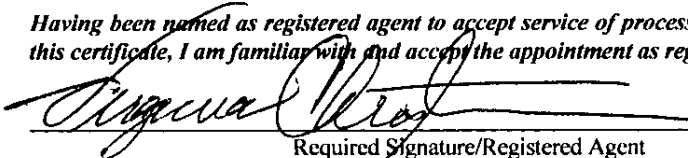
The name and address of the Incorporator is:

Name: Jason D. Martinez

Address: 555 NE 34th St., #1702

Miami, FL 33137


*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature/Registered Agent

2/1/2013

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
Required Signature/Incorporator

2/1/2013

Date

FILED  
13 MAR 11 PM 4:04  
CLERK OF STATE  
TALLAHASSEE, FLORIDA